JC525 Ø PTO

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Attorney Docket No.	MILONEI
First Inventor	MILONE
TIMO METHOT	OF ACCURATE,
	E-1-275412000

U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

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	APPLICA	TION ELEMENTS	ADDRESS TO: Box Patent Application
1	See MPEP chapter 600 concerning utility patent application contents.		Washington, DC 20231
	1. Submit on original and a Applicant claims to	om (e.g., PTO/SB/17) diplicate for fire processing: mall artitly status.	CD-ROM or CD-R in duplicate, large table or Computer Program (Appandor) Nucleotide and/or Amino Acid Sequence Submission
	" "" Size 3/ UPIC 1.2/.		(if applicable, all necessary) Computer Readable Form (CRF)
	3. (preferred errengemen - Descriptive title	[Total Pages	b. Specification Sequence Listing on
		e to Related Applications arding Fed sponsored R & D	i. CD-ROM or CD-R (2 copies); or
	- Reference to se	quence listing, a table,	ii. 🔲 paper
	- Background of		c. Statements verifying identity of above copies
	- Brief Summary - Brief Descriptio	n of the Orawings (if filed)	ACCOMPANYING APPLICATION PARTS
	- Detailed Descri - Claim(s)	ption	9. Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement Power of
	- Abstract of the	Disclosure	10. (when there is an assignee) Attorney
	4. Drawing(s) (35 U	1.S.C. 113) Total Sheets 5	11. English Translation Document (if applicable)
### ###	5. Oath or Declaration	[Total Pages]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Catetons
	a. Newly exec	uted (original or copy) prior application (37 CFR 1.63 (d))	13. Preliminary Amendment
	b. Copy from a	opnor application (37 CFR 1.63 (d)) dion/divisional with Box 18 completed)	14. Return Receipt Postcerd (MPEP 503) (Should be specifically itemized)
		ION OF INVENTOR(S) Hernerit attached deleting inventor(s)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)
Table 1	named in	the prior application, see 37 CFR and 1 33(b)	16. Request and Certification under 35 U S C 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35
T,	<u>, </u>		or its equivalent.
14.		Sheet. See 37 CFR 1.76	17. Other:
8	18. If a CONTINUING APPLI or in an Application Date Shi		ply the requisite information below and in a preliminary amendment,
475 423	Continuation	Divisional Continuation in-part (CIP)	of prior application No
din di	Prior application information Box CONTINUESTICAL OR COMME	Examiner	Group At Und
	Box Sb. is considered a part o	f the disclusive of the accommonutes couling	uation or divisional application and it hereby incorporated by reference. If Melly contrad from the submitted application parts.
	The state of the s	19. CORRESPOND	
	Customer Number or Bar C	ode Lebel	97 Carrespondence eddress below
	Name	ROBERT	NATHANS
		36 STAG D	RIVE
	Address	WILL PRIOR	
	City	BILLERICA	State MA Zip Code 0 82
	Country	U.S Tel	lephone 978-667-3060Fee SAME#
	Name (Print/Type)	ROBERT NATHANS	Registration No. (Attorney/Agent) 19,588
	Signature	Main	Date 8/30/01
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PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

(\$) 5/6

Complete if Known				
Application Number				
Filing Date				
First Named Inventor	MILONE			
Examiner Name				
Group Art Unit				
Attorney Docket No.	MILANEL			

METHOD OF PAYMENT	FEE CALCULATION (continued)			
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEES			
Deposit	Large Small			
Account Number	Entity Entity Fee Fee Fee Fee Fee Description	Fee Paid		
Deposit	Code (\$) Code (\$)			
Account Name	105 130 205 65 Surcharge - late filing fee or oath			
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Applicant claims small entity status.	139 130 139 130 Non-English specification			
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination			
2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR pnor to			
G Check Credit card Morley Other	Examiner action 113 1,840* 113 1.840* Requesting publication of SIR after			
FEE CALCULATION	Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month			
Large Entity Small Entity	116 390 216 195 Extension for reply within second month			
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 890 217 445 Extension for reply within third month			
101 710 201 355 Utility filing fee 355	118 1,390 218 695 Extension for reply within fourth month			
106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month			
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal			
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal			
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing			
SUBTOTAL (1) (\$) 355	138 1,510 138 1,510 Petition to institute a public use proceeding			
	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional			
Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)			
Total Claims	143 440 243 220 Design issue fee			
Claims Multiple Dependent	144 600 244 300 Plant issue fee			
and the periodical and the perio	122 130 122 130 Petitions to the Commissioner			
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1.17(q)			
Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)			
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))			
104 270 204 135 Multiple dependent claim, if not paid	149 710 249 355 For each additional invention to be	,		
109 80 209 40 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	179 710 279 355 Request for Continued Examination (RCE)			
And a see a selection	169 900 169 900 Request for expedited examination of a design application]		
SUBTOTAL (2) (\$) (6)	Other fee (specify)			
**or number previously paid, if greater, For Reissues, see above *Reduced by Basic Filing Fee Paid *SUBTOTAL (3) (\$)				
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SUBMITTED BY			Complete (if applicable)		f applicable)
Name (Print/Type)	ROBERT N	INTHANS	Registration No. 19558 (Attorney/Agent)	Telephone	978-667-3060
Signature	Mark	hath		Date	8/30/01

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